Consultation on Strengthening Health Research Capacity in the Pacific

Nadi, Fiji
3-6 October 2007
REPORT

CONSULTATION ON STRENGTHENING HEALTH RESEARCH CAPACITY
IN THE PACIFIC

Convened by:

WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR THE WESTERN PACIFIC

Nadi, Fiji
3–6 October 2007

Not for sale

Printed and distributed by:

World Health Organization
Regional Office for the Western Pacific
Manila, Philippines

February 2008
NOTE

The views expressed in this report are those of the participants in the Consultation on Strengthening Health Research Capacity in the Pacific and do not necessarily reflect the policy of the World Health Organization.

This report has been prepared by the World Health Organization Regional Office for the Western Pacific for governments of Member States in the Region and for those who participated in the Consultation on Strengthening Health Research Capacity in the Pacific, which was held in Nadi, Fiji from 3 to 6 October 2007.
## LIST OF ACRONYMS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>COHRED</td>
<td>Council on Health Research and Development</td>
</tr>
<tr>
<td>EVIPNet</td>
<td>Evidence-Informed Policy Networks</td>
</tr>
<tr>
<td>GFHR</td>
<td>Global Forum for Health Research</td>
</tr>
<tr>
<td>HRCNZ</td>
<td>Health Research Council of New Zealand</td>
</tr>
<tr>
<td>HRCP</td>
<td>Health Research Council of the Pacific</td>
</tr>
<tr>
<td>ICRG</td>
<td>International Collaborative Research Grants</td>
</tr>
<tr>
<td>NHMRC</td>
<td>National Health and Medical Research Council (Australia)</td>
</tr>
<tr>
<td>NHRS</td>
<td>National health research systems</td>
</tr>
<tr>
<td>NZAID</td>
<td>New Zealand Agency for International Development</td>
</tr>
<tr>
<td>OPIC</td>
<td>Obesity Prevention in Communities</td>
</tr>
<tr>
<td>PHD</td>
<td>Pacific Health Dialog</td>
</tr>
<tr>
<td>PIC</td>
<td>Pacific island countries</td>
</tr>
<tr>
<td>SPC</td>
<td>Secretariat of the Pacific Community</td>
</tr>
<tr>
<td>STEPS</td>
<td>STEPwise approach to surveillance</td>
</tr>
<tr>
<td>WPACHR</td>
<td>Western Pacific Advisory Committee on Health Research</td>
</tr>
</tbody>
</table>

**Keywords:**

Health services research / Research support as topic – economics, organization and administration / International cooperation / Pacific islands
SUMMARY

A Consultation on Strengthening Health Research Capacity in the Pacific was held in Nadi, Fiji from 3 to 6 October 2007. The consultation was attended by 15 temporary advisers from 12 countries, a consultant, five WHO staff members and 17 representatives and/or observers from universities, Health Research Council of New Zealand (HRCNZ), Health Research Council of the Pacific (HRCP), New Zealand Agency for International Development (NZAID) and Secretariat of the Pacific Community (SPC).

The objectives of the meeting were:

1. to review the development of national health research systems and capacity in health research in Pacific island countries;

2. to identify (a) research priorities, (b) ways to improve health research capacity, (c) options for better and sustainable funding for health research, and (d) ways to improve access to and use of Pacific health research reports; and

3. to determine mechanisms for better networking between Pacific countries in the area of health research.

The consultation consisted of background presentations by WHO staff and the consultant, and plenary presentations by Dr Colin Tukuitonga, New Zealand, and Professor Jan Pryor, Fiji. Professor Terry Dwyer, Chair of the Western Pacific Advisory Committee on Health Research provided an overview of WHO's global and regional activities relevant to the consultation's objectives. The participants and observers provided individual perspectives regarding the research capacity-building activities currently being conducted in their countries.

Recommendations were drafted following small group discussions during the latter stages of the meeting. The large number of recommendations reflected the wish of participants to identify and document the range of opportunities for building effective national health research systems and for translating research into policies and health care practices. The conclusions and recommendations from this meeting are listed below.

1. The mapping of national health research systems, which had provided valuable insight into the strengths and weaknesses of the national health research system in 15 countries, should be extended to the seven countries and areas not included in the initial exercise.

2. Pacific island countries should work with each other, with global and regional agencies and with health research councils in the region, to address the gaps in national organization of health research identified by the mapping exercise.

3. Activities that strengthen research capacity should be coordinated on a regional and/or subregional basis by agencies such as the HRCP, SPC and WHO.

4. Priority should be given to strengthening networks across government sectors within countries.
WHO, regional tertiary educational institutions and research councils in the Pacific region [e.g. Health Research Council of New Zealand and National Health and Medical Research Council (Australia)] should provide support for research training opportunities.

Pacific island countries should explore opportunities to establish partnerships with global and regional agencies to ensure that their research management policies and processes (e.g. ethics review of research) meet best practice standards.

Pacific island countries should be encouraged to commit 2% of their national health expenditure on health research, as recommended by WHO (resolution WHA58.34).

Donor agencies should be encouraged to allocate 5% of their contribution to health development aid to health research, as recommended by WHO.

Countries and donors from outside of the Pacific community should be encouraged to support health research and related activities in Pacific island countries.

A strategy should be developed to increase the involvement of the non-Pacific island countries in the Pacific community (Australia, France, New Zealand and United States of America). Efforts should be made to increase their support for research and capacity strengthening.

Health research should be added to the agenda of the biannual PIC Health Ministers Meeting. Discussions should focus on a regional approach to resourcing of research capacity strengthening, research funding and translation of evidence into policy and healthcare services.

Capacity within Pacific island countries to collect, analyse and disseminate essential health information, within and between government agencies, should be strengthened.

Pacific Island countries should work with WHO to identify and harmonize priority health information requirements and to enhance the use of existing information and learning tools such as Pacific Open Learning Health Net.

Pacific island countries should promote coordination of knowledge management and dissemination at a national, subregional and regional levels, e.g. establishment of a Pacific Health Research Registry for all relevant research.

WHO should support the establishment of a Pacific Observatory in Health Systems and Policy to promote knowledge transfer and translation of knowledge into policy and practice in Pacific island countries.

HRCP should be supported to ensure that Pacific Health Dialog remains an important forum for publication and dissemination of knowledge relevant to health of Pacific peoples.

The success of the International Collaborative Research Grants, a partnership between the Wellcome Trust, HRCNZ and NHMRC for supporting collaborative research activities (in developing and developed countries) and capacity-building (in developing countries) was noted.

The current sponsors of International Collaborative Research Grants and other funding agencies with an interest in the Pacific should be approached to establish further ICRG-like initiatives with a focus on translational research on priority health issues in Pacific island countries.
(19) Pacific island countries should be encouraged to work together on a subregional and regional basis and with Australia and New Zealand to establish ICRG-like programmes with the dual objectives of research capacity strengthening and health research outcomes.
CONTENTS

SUMMARY

1. INTRODUCTION..................................................................................................................... 1
   1.1 Objectives ....................................................................................................................... 1
   1.2 Participants and resource persons ............................................................................... 1
   1.3 Opening ceremony ........................................................................................................ 1
   1.4 Appointment of Chairperson, Vice Chairperson and Rapporteur................................. 2

2. PROCEEDINGS ...................................................................................................................... 2
   2.2 Strengthening research capacity in the Pacific ............................................................. 3
   2.3 Regional and global capacity strengthening initiatives ............................................... 5
   2.4 Priority setting for health research ............................................................................. 6
   2.5 Knowledge management and access to research findings ....................................... 7
   2.6 The use of research in health policy making ............................................................... 7
   2.7 Other regional initiatives ............................................................................................. 8

3. CONCLUSIONS AND RECOMMENDATIONS.................................................................. 10

ANNEXES:

ANNEX 1 AGENDA

ANNEX 2 LIST OF TEMPORARY ADVISERS, REPRESENTATIVES/OBSERVERS, CONSULTANT, AND SECRETARIAT

ANNEX 3 OPENING REMARKS BY THE MINISTER OF HEALTH, FIJI

ANNEX 4 WELCOME REMARKS BY THE REGIONAL DIRECTOR DELIVERED BY THE WHO REPRESENTATIVE IN THE SOUTH PACIFIC
1. INTRODUCTION

A Consultation on Strengthening Health Research Capacity in the Pacific was held in Nadi, Fiji from 3 to 6 October 2007. The consultation was designed to review the current capacity for health research in Pacific island countries and areas, to explore ways to establish effective national health research systems, and to improve collaboration between Pacific countries. The consultation enabled Pacific island countries to share experiences in establishing and strengthening their health research capacities.

In 2005, the World Health Assembly adopted resolution WHA58.34, which urged Member States to strengthen their national health research systems to provide the evidence base needed for development, implementation and evaluation of appropriate health policies, programmes and public health interventions.

The consultation was organized by the World Health Organization (WHO) in collaboration with the Council on Health Research for Development (COHRED) and the Health Research Council of the Pacific (HRCP). The programme emphasized the opportunities that could be provided through partnership and collaboration.

1.1 Objectives

(1) To review the development of national health research systems and capacity in health research in Pacific island countries.

(2) To identify (a) research priorities, (b) ways to improve health research capacity, (c) options for better and sustainable funding for health research, and (d) ways to improve access to and use of Pacific health research reports.

(3) To determine mechanisms for better networking between Pacific countries in the area of health research.

The provisional agenda is attached as Annex 1.

1.2 Participants and resource persons

The consultation was attended by 15 temporary advisers from 12 countries, a consultant, five WHO staff members, and 17 representatives and/or observers from the University of Auckland, University of South Pacific, Fiji School of Medicine, Fiji School of Nursing, Health Research Council of New Zealand (HRCNZ), HRCP, New Zealand Agency for International Development (NZAID), and Secretariat of the Pacific Community (SPC). A list of participants is attached as Annex 2.

1.3 Opening ceremony

The consultation was opened by the Honourable Dr Jona Senilagakali, Minister of Health, Government of Fiji, who emphasized the importance of health research in providing the evidence for the delivery of health care services. He noted a number of examples from the Pacific that showed how research had been used to improve health and health services. He argued that the World Health Assembly’s recommendations—at least 2% of national health expenditure and at
least 5% of health sector project and programme aid from development agencies should be used for health research—were challenging but realistic targets. He maintained that there was a need for long-term investment. He concluded by noting the challenges ahead and suggesting that local knowledge be combined with international best practice in order to find solutions and make practical recommendations for action.

Dr Chen Ken, WHO Representative in the South Pacific, welcomed the participants on behalf of the WHO Regional Director. In his address, he emphasized the importance of good quality health research in improving health policy-making and health outcomes. He noted that while WHO was not a major donor of health research, it has an important role in promoting and advocating health research.

1.4 Appointment of Chairperson, Vice-Chairperson and Rapporteur

Dr Roro Daniel, Cook Islands, was appointed as Chairperson, Ms Frances Brebner, Samoa, as Vice-Chairperson, and Dr Sunia Foliaki, Tonga, as Rapporteur.

2. PROCEEDINGS

2.1 Review of recent developments and current situation of health research in the Pacific

Professor Jan Pryor, Fiji, on behalf of HRCP, presented the results of the mapping of national health research systems (NHRS) in 15 Pacific island countries. The study was sponsored by the WHO Regional Office for the Western Pacific and conducted by HRCP using the COHRED mapping template modified for Pacific countries. The mapping exercise used structured interviews with key informants (e.g. HRCP country focal points) in each country. The 15 countries surveyed were Cook Islands, Federated States of Micronesia, Fiji, Kiribati, Marshall Islands, Nauru, Niue, Palau, Papua New Guinea, Samoa, Solomon Islands, Tonga, Tokelau, Tuvalu and Vanuatu. Seven other countries and areas (American Samoa, French Polynesia, Guam, New Caledonia, Northern Marianas, Pitcairn Islands, and Wallis and Futuna) were not included in this phase of the project.

The mapping exercise sought information in the following key areas:

(1) governance of NHRS;
(2) health and health research policies and priorities;
(3) communication, dissemination and utilization of research; and
(4) routine health information systems together with information on the institutions and key stakeholders engaged in research for health.

Each of the answers to the 18 questions was coded as follows:

0 - little or nothing happening in the area,
1 - at least something is happening, and
2 - more development in the area compared with most other countries.

Scores were calculated for each country and for each question and scaled to 100.
In the discussion of the mapping, it was noted that the scoring system had given equal weight to each question even though some questions were more important than others in reaching a conclusion as to the NHRS in an individual country. One also had to be careful not to assume that a score of 2 was equivalent to international best practice.

Key findings from the mapping exercise included the following:

1. The governance and management components of the health research systems varied greatly among the 15 countries. In general the Melanesian and larger Polynesian countries have more advanced NHRS structures in place than the smaller Polynesian and Micronesian countries (with the exception of Palau).

2. A clearly articulated policy on health research is lacking in nearly all the countries. Countries are challenged to effectively translate research outputs and knowledge into policy and health care practice, addressing priority health issues.

3. Few countries have dedicated personnel and/or a dedicated unit responsible for health research. Further development is needed in the countries that do have one.

4. While most countries have defined health priorities, very few have health research priorities.

5. In most countries, efforts to bring research and information to policy-makers are sporadic, ad hoc and dependent on individuals. However, many countries are increasing efforts in this area.

6. Legislation addressing health research is lacking in nearly all countries. Ethical review structures and processes are in place in only seven countries.

Based on their research, HRCP concluded the following:

1. All Pacific island countries need to translate research outputs and knowledge into policy and health care practices that address priority health issues.

2. Research capacity needs to be strengthened across the various components of the NHRS in the Pacific island countries to allow countries to effectively use information and research as tools for development.

### 2.2 Strengthening research capacity in the Pacific

Dr Bruce Scoggins, New Zealand, opened the session on experiences in strengthening capacity and establishment of NHRS in the Pacific island countries. He assessed the current situation in the region against the criteria for an effective NHRS identified by COHRED, Global Forum for Health Research (GFHR) and WHO. He concluded that with respect to research capacity strengthening, many countries in the Pacific would be unable to establish an NHRS that met all the criteria. However, countries would have an opportunity to build a small trained workforce with a range of skills and competencies. He presented a case for the development of innovative approaches and solutions that linked the development of effective, affordable and sustainable interventions addressing current and emerging health issues to strategies to strengthen research capacity.
Dr Scoggins suggested that one approach would be to develop partnerships between developed and developing countries in the Pacific to address the dual goals of health outcomes and research capacity. A case was also made for regional coordination across the Pacific involving the HRCP and SPC together with a range of organizations in Australia and New Zealand. His conclusions with respect to NHRS were similar to those in the earlier paper, which presented the situational analysis. He suggested that countries without an NHRS need to have adequate management skills to effectively carry out and/or use research. In light of the findings, it was concluded that further investigation was needed to determine the best practice for NHRS in the Pacific island countries.

As an adjunct to the situational analysis on NHRS, Dr Reijo Salmela presented a bibliometric analysis of Pacific health research publications (i.e. those that had one or more authors with a Pacific island country address) for the period 1992–2006. It was concluded that most of the health research papers were written by researchers in Papua New Guinea and Fiji—the two countries with medical schools. Collaboration between researchers in these two countries and in Australia, the United States of America and Europe was noted. There was no evidence of an increase in papers over the past five years.

In the ensuing discussion, a number of concerns regarding the use of the Web-based publication database were raised. For example, Pacific Health Dialog, the leading Pacific journal published by HRCP, and a number of other national publications were not included. It was concluded that all relevant Pacific health research publications including reports and theses must be made available for use by countries. Establishment of a Pacific Health Research Register to be managed by the HRCP was proposed.

To better understand the current activities contributing to research capacity strengthening in the region, three different perspectives were presented.

In the first, Dr Roro Daniel, Chair of HRCP, and Dr Salanieta Saketa presented on outline of HRCP’s activities. For the past six years, the Council’s activities have focused on health capacity strengthening and relationship building and the promotion of health research as a development tool. Discussion centred on how this solid base could be best developed in the future. With a new constitution and an elected board, the Council has identified a number of key strategies that will support Pacific countries as they seek to build research capacity. Particular emphasis will be given to regional and global collaboration, translation of research findings into policy and practice and dissemination of research (e.g. through publication in Pacific Health Dialog). Strengthening of NHRS in countries will continue to be particularly important. Bringing all the strategies together in a Strategic Plan will be a priority for the Council.

Professor Jan Pryor discussed the work being carried out in the region to develop NHRS. He emphasized the importance of understanding the concepts and principles of Essential National Health Research (i.e. participation, informed decision-making and an inclusive approach), especially in a Pacific context. He identified the steps that a country needed to take to establish a NHRS and emphasized the value of learning from other countries. He also noted the importance of developing and implementing an action plan (including timelines, responsible parties). In conclusion, he stressed that a NHRS provided countries an opportunity to enhance partnerships and to strengthen research capacity.

Dr Ngamau Wichman-Tou presented an overview of the various research-capacity-strengthening activities supported by the Health Research Council of New Zealand. The HRCNZ has had a Pacific Health Research Committee for more than 50 years and has identified Pacific people as a priority population. It also supports research training awards for Pacific postgraduate students eligible to enrol in New Zealand tertiary education institutions. The
HRCNZ supports investigator-initiated research projects as well as a number of Pacific partnership initiatives. The International Collaborative Research Grants programme, conducted in collaboration with the Wellcome Trust (United Kingdom) and NHMRC (Australia), has been an important funding pool for Pacific health research. The HRCNZ also has close links with the New Zealand Ministry of Health’s Action Plan for Pacific Health, providing opportunities for strategic alignment of investment and enhanced knowledge transfer.

Dr Reijo Salmela, WHO Regional Office for the Western Pacific, closed the first day on behalf of Dr Mohir Ahmedov, COHRED, who was unable to attend. Dr Ahmedov’s paper revisited some of the key thinking with respect to identifying what is required to establish an effective NHRS. This led to discussion on a range of issues including – how to build political support into a NHRS, how to design a NHRS to achieve desired objectives, how to strengthen existing governance and management structures, and what should be the priorities for research capacity strengthening. A key outcome from this discussion was the need to ensure a clear link between health research priorities and priority health outcomes and that the types of research were clearly defined.

Participants identified two important issues for the Pacific region: (1) limited funding and resources available for health research, and (2) limited human capacity to do research. They noted the success of the International Collaboration Research Grant (ICRG) programme with its dual objectives of health outcomes and capacity-building. It was agreed that countries developing a NHRS needed to prioritize their capacity-building requirements and build policy analysis capacity in their Ministry of Health. It was also noted that an effective NHRS requires a clear understanding of the health information to be collected and analysed as well as regional and/or subregional coordination of activities. Establishment of a Pacific health research register was recommended together with a commitment to improve the publication of health research conducted in Pacific island countries.

2.3 Regional and global capacity strengthening initiatives

Professor Terry Dwyer, Chair of the WHO Western Pacific Advisory Committee on Health Research (WPACHR), provided an update of recent WHO developments in health research at a global and regional level. Of particular relevance to this consultation was the update on the Ministerial Forum on Research for Health, which has a theme of “strengthening research for health, development and equity”. The forum will be held in Bamako, Mali, in November 2008, and is being organized by WHO, UNESCO, World Bank, COHRED, GFHR and Government of Mali. The key objectives of the forum are particularly relevant to the Pacific Island countries:

(1) To develop connectivity between stakeholders at different levels.
(2) To empower governments to develop research for health.
(3) To strengthen national capacities.
(4) To promote public confidence in research.
(5) To agree on how to measure impact of research.

Other relevant WHO activities include the development of WHO’s research strategy and the work of the Intergovernmental Working Group on Public Health, Innovation and Intellectual Property. It was noted that Pacific island countries had been engaged in the consultations for the working group. Also important to the region is the ongoing development of WHO’s policies and processes on the use of evidence. The activities of the Alliance for Health Policy and Systems Research in the Pacific region were noted.
Dr Colin Tukuitonga, New Zealand, delivered a keynote address that provided valuable insight into the perspectives of Pacific island countries on strengthening health research capacity. He outlined the need for countries to translate research outputs and knowledge into health care policy and practice in order to address priority health problems and noted that many do not have a recognizable NHRS. He emphasized that research must be used as a planning, management, monitoring and evaluation tool and must be integrated into day-to-day work. The importance of local solutions for prevailing health problems in Pacific island countries (e.g. intervention for prevention and control of noncommunicable diseases) was not to be underestimated. He was critical of past research that was externally initiated and academic and which contributed little to priority health needs in the Pacific. In conclusion, he noted that while there was a consensus on the problems, there was no consensus on the solutions. As such, he recommended countries to do the following:

1. Use routinely collected data more effectively;
2. Focus on evaluation and applied and/or operational research;
3. Search for solutions;
4. Determine their own research agenda (i.e. not donor driven) and focus on participatory health research;
5. Build capacity for research and encourage a research culture; and
6. Focus on solutions (i.e. research should not be an add-on).

The discussions on Dr Tukuitonga's paper identified a number of issues for further action. It was recommended that the link between health ministries and national statistics offices should be strengthened and that SPC and WHO should simplify health information requirements and seek to ensure harmonization.

Participants raised the need for better coordination of activities through regional and subregional networks, with the role of key stakeholders clearly defined. HRCP was identified as having a key role in providing coordination and for building research capacity. The ICRG programme was also seen as an important and productive partnership that needed to be extended, as an example of “putting it into action”.

Professor Jan Pryor presented a paper on the research-capacity-strengthening activities linked to the obesity prevention in communities (OPIC) project, which is part of the International Collaboration Research Grants Program. The community-based project seeks to reduce obesity in adolescents in Australia, Fiji, New Zealand and Tonga. It has dual objectives of supporting collaborative research to improve health and building research capacity. Capacity strengthening has focused on health professionals and the community. Professor Pryor argued that a lack of research funding, limited competitiveness and insufficient research capacity have contributed to the underdevelopment of research in the Pacific. Through the OPIC project, the research team has engaged the community, health care professionals and those working on health research systems through formal course work programmes (advance qualifications) and workshops and seminars. In closing, he noted the need to better develop individual staff development plans, to engage the community (in a participatory action model) and to provide scholarships for postgraduate education.

2.4 Priority setting for health research

Dr Bruce Scoggins presented a paper on the methodology and tools of setting priorities on behalf of Dr Mohir Ahmedov, COHRED. The paper addressed the importance of setting priorities for health research and presented a process to establish priorities based on six practical steps. The paper presented a range of methodologies with useful discussion on their relative merits. In conclusion, the paper emphasized that priority setting is not easy, that it should not be
a one-off experience and that it has to be linked to action. In the Pacific, only Papua New Guinea and Vanuatu have set health research priorities. It was suggested that regional priorities or regional networks with common priorities should be established. It was anticipated that there would be excellent opportunities for countries to share experiences and to collaborate in both the determination of priorities for health research and in the research itself.

2.5 Knowledge management and access to research findings

The final session of the second day focused on knowledge management and improving access to research findings. The discussion was led by Charles Raby, WHO Regional Office for the Western Pacific, who presented an overview of WHO’s regional knowledge management resources. He described WHO as a “knowledge broker” who responds to the requests of Member States for high-quality relevant and timely information platforms and products. WHO’s second strategic direction is translating knowledge into policy and action. The Pacific Open Learning Health Net learning centre, which has been established in 12 countries, was identified as a valuable resource for training.

Professor Sitaleki Finau, Editor, spoke about Pacific Health Dialog, a journal of community health and clinical medicine for the Pacific. Since 2004, the journal has been published twice a year by the HRCP. The journal is supported by sponsorship rather than through subscriptions. Professor Finau highlighted the relocation of the editor to New Zealand; the need to secure funding for operational costs, printing and distribution; and the need to attract more subscribers. From the perspective of the consultation, posting the journal on the Internet would enable it to be an integral part of a regional knowledge management strategy.

2.6 The use of research in health policy-making

Dr Bruce Scoggins addressed the use of research in health policy-making and health care practice in the Pacific. He presented a background paper that reviewed the approaches used to link research to policy and practice. He went on to discuss progress in the Pacific region prior to exploring future opportunities at the country and regional level.

It was noted that the WHO Regional Framework for Health Research, developed by WHO WPACHR in 2003, had set the following goals for each country:

1. Develop and implement a health research strategy.
2. Build capacity to conduct quality research to address priority health needs.
3. Enhance dissemination and use of research.
4. Enhance communication within and between countries.

With respect to the use of research, there are only a few examples of successful uptake of knowledge. One example was the WHO STEPwise approach to surveillance (STEPS)—a global programme that has assisted low- and middle-income countries in assessing their risk profile for chronic diseases in their population. It has also assisted in building research capacity. Although at least one of the steps in the STEPS programme has been conducted in all of the Pacific island countries as of August 2007, only four country reports (American Samoa, Fiji, Nauru, and Samoa) have been posted on the WHO website. In Samoa, the Ministry of Health used the results of the STEPS analysis to develop strategies and action plans that address the noncommunicable disease problems in the country. In another example, Tonga used the STEPS programme to identify the success factors for policy formulation. Workshop participants expressed interest in the ICRG programme that was established by the Wellcome Trust (UK), HRCNZ and National Health and Medical Research Council (Australia) to develop partnerships between research groups in developed countries and those in developing countries in Asia and
the Pacific. Participants were particularly interested in the establishment of partnerships, the focus on translation research on priority health issues, the dual objective of research output and research capacity strengthening, and the opportunities to implement successful strategies across the region.

Dr Scoggins pointed out that countries with very limited research capacity would have to find realistic ways to translate evidence into action. Examples of opportunities at the country and regional levels were discussed. Following the discussion, it was recommended that countries maximize opportunities to collaborate and network with each other and with Australia and New Zealand, and that partnerships such as the ICRG be extended with a specific focus on priority health issues for the Pacific island countries.

At the regional level, it was suggested that WHO and HRCP should coordinate activities to ensure that best practices and methodologies were used and that countries had an opportunity to learn from each other. It was recommended that a Pacific regional Observatory in Health Systems and Policies should be established and that more institutions in Pacific countries should subscribe to the WHO Health Inter-network Access for Research Initiative. In this regard, problems associated with Internet speed, cost and unreliability in the Pacific were noted.

The second paper in this session, presented by Dr Reijo Salmela, WHO Regional Office for the Western Pacific, addressed the Evidence-Informed Policy Networks (EVIPNet), which is an important new global initiative to develop in-country capacity to access and use health research to shape health policies and systems. By way of background, Dr Salmela noted that the two key factors influencing the use of research by policy-makers were the interaction between researchers and policy-makers and timing/timeliness. He identified four specific challenges in linking research to policy:

1. research competes with many other factors in the policymaking process;
2. research is not valued as an information input;
3. research is not relevant; and
4. research is not easy to use.

Options to address these challenges were presented prior to discussion of the history and functions of EVIPNet. Participants noted the establishment of EVIPNet Asia and agreed that there was a great potential for EVIPNet in the Pacific region.

2.7 Other regional initiatives

Dr Roro Daniel briefly reviewed the strategies, goals and future aspirations of the HRCP. The council could play an important coordination role in research capacity strengthening and NHRS activities in the Pacific. However, it would need to secure more funding from NZAID (six-year contract ends in 2007).

Dr Ngamau Wichman-Tao, Manager, Pacific Health Research of HRCNZ, presented information on a project carried out in Cook Islands by HRCNZ. The project, “Building a Research Management Infrastructure for the Cook Islands and the Pacific”, put in place a framework allowing the government to manage all research (not only health research) conducted in Cook Islands. It is assisting in building research capacity and, through its website, is providing an important link for the dissemination of research and its translation into policy and action. Participants agreed that the approach and framework developed in Cook Islands should be considered by other countries.
Professor Jan Pryor, Fiji, discussed the research-capacity-strengthening activities and relevant research being conducted at the Fiji School of Medicine. Four and a half full-time researchers are employed at the Fiji School of Medicine. Another 25 to 30 staff members are working on the two ICRG programmes, the OPIC project, a traffic-related injury project, STEPS and Rapid Needs Assessment for Reproductive Health. The school has a research management plan with a focus on health systems research. It collaborates and has formed partnerships with Pacific countries, institutions and agencies. The school has played an important role in building Pacific capacity for research. In the future, it will build on this solid base and seek to further develop research in specific priority areas such as noncommunicable diseases, mental health and natural products. Of particular note was the proposal to establish a molecular biology laboratory for hepatitis B virus studies. It was also noted that the school had hosted the HRCP for six years (ending December 2007).
3. CONCLUSIONS AND RECOMMENDATIONS

Four small working groups were formed to draft recommendations to key stakeholder groups. Each group presented its draft recommendations to all the participants. Following a discussion, two larger working groups were formed to fine-tune the initial recommendations.

At the final session, the two groups presented their recommendations. The following recommendations have been grouped to match the objectives of the consultation. The large number of recommendations reflects the wish of participants to identify and document the range of opportunities that need to be explored if the Pacific island countries want to build effective NHRS and translate research into policies and health care practices.

3.1 NHRS mapping

1. The mapping exercise, which used the COHRED methodology modified for Pacific Island countries, provided valuable insight into the strengths and weaknesses of the national health research systems in 15 countries. As such, mapping should be extended to the seven countries and areas not included in the initial exercise.

2. The mapping exercise identified gaps in the national organization of health research. Pacific island countries should work with each other, with global and regional agencies and with health research councils in the region to address these gaps.

3.2 Building research capacity

3. Activities that strengthen research capacity should be coordinated on a regional and/or subregional basis by agencies such as the HRCP, SPC and WHO.

4. Priority should be given to strengthening networks across government sectors within countries.

5. WHO, regional tertiary educational institutions and research councils in the Pacific region (e.g. HRCNZ and NHMRC) should provide support for research training opportunities.

6. Pacific island countries should explore opportunities to establish partnerships with global and regional agencies to ensure that their research management policies and processes (e.g. ethics review of research) meet best practice standards.

3.3 Sustainable funding for health research

7. Pacific island countries should be encouraged to commit 2% of their health expenditure on health research, as recommended by WHO.

8. Donor agencies should be encouraged to allocate 5% of their contribution to health development aid to health research, as recommended by WHO.

9. Countries and donors from outside of the Pacific community should be encouraged to support health research and related activities in Pacific island countries.
A strategy should be developed to increase the involvement of non-Pacific island countries in the Pacific community (Australia, France, New Zealand and United States of America). Efforts should be made to increase their support for research and capacity strengthening.

Health research should be added to the agenda of the biannual PIC Health Ministers Meeting. Discussions should focus on a regional approach to research capacity strengthening, research funding, and translation of evidence into policy and health care services.

3.3 Collection, analysis and dissemination of high-quality information

Capacity within Pacific island countries to collect, analyse and disseminate essential health information, within and between government agencies, should be strengthened.

Pacific island countries should work with WHO to identify and harmonize priority health information requirements and to enhance the use of existing information and learning tools such as POLHN.

Pacific island countries should promote coordination of knowledge management and dissemination at national, subregional and regional levels, e.g. establishment of a Pacific Health Research Registry for all relevant research.

WHO should support the establishment of a Pacific Observatory in Health Systems and Policy to promote knowledge transfer and translation of knowledge into policy and practice in Pacific island countries.

HRCP should be supported to ensure that Pacific Health Dialog remains an important forum for publication and dissemination of knowledge relevant to health of Pacific peoples.

3.4 International Collaborative Research Grants

The success of the International Collaborative Research Grants (ICRG), a partnership between Wellcome Trust, HRCNZ and NHMRC for supporting collaborative research activities (in developing and developed countries) and capacity-building (in developing countries), was noted.

The current sponsors of ICRG and other funding agencies with an interest in the Pacific should be approached to establish ICRG-like initiatives with a focus on translational research on priority health issues in Pacific island countries.

Pacific island countries should be encouraged to work together on a subregional and regional basis and with Australia and New Zealand to establish ICRG-like programmes with the dual objectives of research capacity strengthening and health research outcomes.

Participants left the consultation with the knowledge and understanding that much needed to be done. To be successful, countries will have to work with each other and in partnership with developed countries involved in the Pacific community (Australia, France, New Zealand and the United States of America). All participants agreed that while resources and capacity to do research were limited throughout the Pacific region, they were committed to working together and with governments, donors and research funding agencies to resolve the issue of resources.
ANNEX 1

PROVISIONAL AGENDA

1. Opening session

2. Review of recent developments and current situation of health research in the Pacific

3. Main issues
   3.1 Experiences on strengthening capacity and establishment of national health research systems in the Pacific island countries
      • Review of experiences on capacity strengthening and building of national health research systems in the Pacific
      • Strengthening national health research systems: Council on Health Research for Development approach
   3.2 Keynote presentations
      • Update on recent developments in health research at global and regional levels
      • Priority needs for research evidence in the Pacific
   3.3 Methodologies and tools for setting research priorities in the Pacific island countries
      • Priority setting for health research: key issues
   3.4 Knowledge management and improving access to research findings
      • Ongoing regional knowledge management activities related to health research
   3.5 Use of research evidence in health policy-making and health care practice in the Pacific
      • Examples of generation and use of evidence for decision-making in the Pacific
      • Evidence-informed Policy Network (EVIPNet) and regional rapid response mechanism (RRRM) to respond to information needs of health policy-makers
   3.6 Options for collaboration and sustainable networking between Pacific island countries in health research
   3.7 Strengthening of health research systems and capacity in the Pacific island countries – the way forward
      • Development of action plans

4. Wrap-up

5. Closure of the session
ANNEX 2

LIST OF TEMPORARY ADVISERS, REPRESENTATIVES/OBSERVERS, CONSULTANT, AND SECRETARIAT

1. TEMPORARY ADVISERS

Dr Dudley Ba'erodo, Head of Surgical Department, National Referral Hospital, P.O. Box 349 Honiara, Solomon Islands. Tel.: (677) 94044. Fax: (677) 24243. Email: stepha2fred@yahoo.com

Ms Frances Brebner, Assistant Chief Executive Officer, Strategic Development, Ministry of Health, Private Mail Bag, Apia, Samoa. Tel.: (685) 23974. Fax: (685) 23234. Email: francesb@health.gov.ws

Dr Roro Daniel, Secretary of Health, Ministry of Health, Rarotonga, Cook Islands. Tel.: (682) 29664. Fax: (682) 23109. Email: r.daniel@health.gov.ck

Dr Gregory Dever, Director, Bureau of Hospital and Clinical Services, Ministry of Health Koror, Republic of Palau 96940. Tel.: 680-488-2813. Fax: 680-488-1211 Email: g_dever@palau-health.net

Professor Terry Dwyer, Director, Murdoch Children's Research Institute, Royal Children's Hospital, Flemington Road, Parkville, Victoria 3052, Australia. Tel.: (613) 8341-6226 Fax: (613) 9348-1391. Email: terry.dwyer@mcri.edu.au

Dr Sunia Foliaki, Massey University, Nuku'alofa, Tonga Tel.: (676) 21496. Fax: (676) 24291. Email: S.Foliaki@massey.ac.nz

Ms Anna Irumai, Acting Director, Monitoring Evaluation Research Branch, Department of Health P.O. Box 807, Waigani, NCD, Papua New Guinea. Tel.: (675) 301-3660. Fax: (675) 323-2147 Email: anna_irumai@health.gov.pg

Mr Russel Kitau, Lecturer, School of Medicine and Allied Health Sciences, University of PNG P.O. Box 5623, Boroko, NCD, Papua New Guinea. Tel.: (675) 342-3831. Fax: (675) 325-0809 Email: kitaurs@upng.ac.pg

Ms Avanoa Paelate, Health Education and Promotion Officer, Princess Margaret Hospital Ministry of Health, Funafuti, Tuvalu. Tel. No.: (688) 207765. Fax No.: (688) 28832 Email: paelate@yahoo.com

Dr Jan Pryor, Professor and Director of Research, Fiji School of Medicine, Private Mail Bag Suva, Fiji. Tel.: (679) 323-3401. Fax: (679) 331-1940. Email: j.pryor@fsm.ac.fj; pryor_jan@gmail.com

Mr Reddy Ravi, Health Research Officer, Ministry of Health, Suva, Fiji Tel.: (679) 322-1424/993-3603. Fax: (679) 331-8227. Email: ravi.reddy@health.gov.fj

Dr Salanieta Saketa, Acting Director, Centeast Health Services, Ministry of Health Suva, Fiji. Tel.: (679) 331-5633. Fax: (679) 331-5568. Email: ssaketa@health.gov.fj

Mr Marcus Samo, Assistant Secretary for Health, Government of Federated States of Micronesia Department of Health, Education and Social Affairs, P.O. Box PS 70, Palikir, FM 96941 Tel.: 691-320-2619/2643. Fax: 691-320-5263. Email: msamo@fsmhealth.fm
2. REPRESENTATIVES/OBSERVERS

FIJI SCHOOL OF MEDICINE
Professor David Brewster, Dean, Fiji School of Medicine, Private Mail Bag, Suva, Fiji. Tel.: (679) 323-320. Fax: (679) 330-5781
Email: d.brewster@fsm.ac.fj

FIJI SCHOOL OF NURSING
Ms Meta Pene, Fiji School of Nursing, Tamavua, Suva, Fiji
Tel.: (679) 3321369. Fax: (679) 3321013

Ms Padma Prasad, Head of Research, Fiji School of Nursing, Tamavua, Suva, Fiji. Tel.: (679) 3321369. Fax: (679) 3321013
Email: padmaprsd@yahoo.com

HEALTH RESEARCH COUNCIL OF NEW ZEALAND
Dr Ieti Lima, Committee Member, Health Research Council of New Zealand, P.O. Box 5541, Wellesley Street, Auckland 1141,
Tel.: 09-268-9487. Fax: 09-337-9988. Email: i.lima@massey.ac.nz

Mrs Esther Cowley-Malcolm, Chair, Pacific Health Research Committee
Health Research Council of New Zealand, P.O. Box 5541, Wellesley St., Auckland 1141, New Zealand. Tel.: 07 312 5720. Fax: 09-377-9988
Email: esnjohn@clear.net.nz

Dr Ngamau Wichman-Tou, Manager, Pacific Health Research
Health Research Council of New Zealand, Te Kaunihera Rangahau Hauora o Aotearoa, Level 3, 110 Stanley St, Auckland 1, P O Box 5541,
Wellesley St., Auckland, New Zealand. Tel.: 0064 9 303 5225
Fax: 0064 9 377 9988. Email: nwichmantou@hrc.govt.nz

NEW ZEALAND AGENCY FOR INTERNATIONAL DEVELOPMENT
Mr Dimitri Geidelberg, Manager, NZAID, Ministry of Foreign Affairs and Trade, Wellington, New Zealand. Tel.: (679) 331-1422
Fax: (679) 330-0842. Email: Dimitri.Geidelberg@mfat.govt.nz

Mr Sachida Nand, Regional Program Administrator, NZAID
New Zealand High Commission, Suva, Fiji.
Email: sachida.nand@mfat.govt.nz

Ms Marion Quinn, Health Advisor, NZAID, Wellington New Zealand. Tel.: 04-439-8133. Fax: 09-377-9988.
Email: marion.quinn@mfat.govt.nz
SECRETARIAT OF THE PACIFIC COMMUNITY

Dr Janet O'Connor, TB Section Head, Secretariat of the Pacific Community, B.P. D5-98848, Noumea Cedex, New Caledonia
Tel.: 687-26-0000. Fax: 687-26-3818. Email: janeto@spc.int

Dr Gary Rodgers, Deputy Section Head, HIV & STI Section Secretariat of the Pacific Community, B.P. D5-98848 Noumea Cedex New Caledonia. Tel.: 687-26-0000. Fax: 687-26-3818 Email: rodgersg@spc.int

UNIVERSITY OF AUCKLAND

Dr David Schaaf, University of Auckland, Private Bag 92019 School of Population Health, Pacific Health, BLD 730, Level 3 Auckland, New Zealand. Tel.: 64-9-3737599 ext. 8647 Fax: 64-9-3737624. Email: d.schaaf@auckland.ac.nz

UNIVERSITY OF THE SOUTH PACIFIC

Mrs Aileen Savu, Development Officer - Planning, University of the South Pacific, Private Bag, Laucala Bay, Suva, Fiji Tel.: (679) 323-2269. Fax: (679) 323-1502. Email: savu_a@usp.ac.fj

Ms Makiva Tuni, Research Component (HRCP Focal Point in Solomon Islands), Health Training and Research, Ministry of Health Solomon Islands. Tel.: 677 38257. Fax: 677-20085 Email: mtuni@moh.gov.sb; makivatuni@yahoo.com.au

3. CONSULTANT

Dr Bruce Scoggins, P.O. Box 42-062 Orakei, Auckland, New Zealand 1745 Tel.: (64 9) 5204662. Fax: (64 9) 5204679. Email: bscoggins@vodafone.net.nz

4. SECRETARIAT

Dr Reijo Salmela, Medical Officer, Situation Analysis for Policy, WHO Regional Office for the Western Pacific, Manila, Philippines. Tel.: (632) 528 9835. Fax: (632) 521 1036 E-mail: salmelar@wpro.who.int

Dr Chen Ken, The WHO Representative in the South Pacific, Suva, Fiji. Tel.: (679) 3300727 Fax: (679) 3300462 and 3311530. Email: chenk@sp.wpro.who.int

Mr Charles Raby, Knowledge Management, WHO Regional Office for the Western Pacific, Manila, Philippines. Tel.: (632) 528 9983. Fax: (632) 521 1036. E-mail: rabyc@wpro.who.int

Mr Steve Baxendale, Technical Officer, Pacific Open Learning Health Net (POLHN) WHO Representative Office in the South Pacific, Suva, Fiji. Tel.: (679) 323-4133 Fax: (679) 323-4144. Email: baxendales@sp.wpro.who.int

Ms Charmina Saili, Technical Officer, Health Systems Strengthening, WHO Representative Office in the South Pacific, Suva, Fiji. Tel.: (679) 3-304600. Fax: (679) 3-300462 Email: sailic@sp.wpro.who.int
Ms Makeleta Koloi, HRCP Coordinator, c/o Fiji School of Medicine, Private Mail Bag, Suva, Fiji. Tel.: 679-3233-402. Fax: 679-3311-940. Email: m.koloi@fsm.ac.fj

Associate Professor Zac Morse, Dean's Office, Fiji School of Medicine, Private Mail Bag, Suva Fiji. Tel.: 679-3311700. Fax: 679-3303469. Email: z.morse@fsm.ac.fj

Ms Shirley Prasad, HRCP Research Assistant, c/o Fiji School of Medicine, Private Mail Bag, Suva, Fiji. Tel.: 679-3233-408. Fax: 679-3311-940. Email: prasad.s@fsm.ac.fj
THE WHO REPRESENTATIVE IN THE SOUTH PACIFIC, DR CHEN KEN,

PARTICIPANTS TO THIS CONSULTATION ON STRENGTHENING HEALTH RESEARCH CAPACITY IN THE PACIFIC,

INVITED GUESTS,

LADIES AND GENTLEMEN.

I am grateful to World Health Organization for inviting me to speak to you and open this consultation on subject of vital importance to Member States of WHO and in particular, the smaller island nations of the Western Pacific region.

With rapid advancement in telecommunication technology and transportation, a new wind of change is now sweeping across the Pacific region which health planners and policy makers, need to seriously take cognisant of, and quickly put in place remedial measures to stop new diseases reaching our shores.

I must emphasize the importance of sharing health information gathered from the various research programmes the World Health Organization and Member States are engaged in for the benefit of other Member States.

You have come from different parts of the Pacific to contribute as to how we can strengthen our capacity and capability to fight diseases, some of which are fairly new to us. And as such, research as to how they are transmitted from person to person and from country to country must be intensified if we are to achieve some degree of success in their control.

In any human endeavour, there are three forces that come into play: power, money and knowledge. Of these three, knowledge is the most powerful and effective to use. It is also the least expensive of the three.

In health service management, knowledge of disease pattern gathered through research, provide the key that will open the door to proper management and control of diseases within the population.

The timing of this meeting is right on target and could not have come at a better time, when we are all concerned about the effects on the health of the people brought about by global warming.

I sincerely hope that you will be able to formulate policies during the four days of your meeting that will help Member States to put in place legislative measures that will enable our people to continue to live a wholesome and an economically and socially productive life.

Thank you.
ANNEX 4

WELCOME REMARKS BY THE REGIONAL DIRECTOR
DELIVERED BY WHO REPRESENTATIVE IN THE SOUTH PACIFIC
IN THE CONSULTATION ON STRENGTHENING HEALTH RESEARCH
CAPACITY IN THE PACIFIC
3-6 October 2007, Nadi, Fiji

HONOURABLE MINISTER OF HEALTH,

DISTINGUISHED GUESTS,

LADIES AND GENTLEMEN.

It gives me a great pleasure to welcome you to this consultation on Strengthening Health Research Capacity in the Pacific. I would like to express my sincere appreciation to the Government of Fiji for hosting this meeting.

Health research is necessary for strengthening the evidence base needed for the development and implementation of appropriate health policies, programmes and public health interventions. We have several examples from the Pacific islands that show how research has been used to improve health and health services.

Ideally, every country should have a national health research system. This is a challenge for small island countries, and we need to discuss how these island countries can best support each other in developing health research systems. National health research systems can identify research priorities, coordinate and manage locally relevant research, generate and distribute resources, and promote the use of research findings. Health ministries also have the need to review research literature and to assess which research findings are most appropriate for their own country.

In 2005 and again in 2007, the World Health Assembly adopted resolutions urging Member States to establish or strengthen national health research policy and to strengthen national health research systems.

The World Health Assembly has also recommended in these resolutions that developing Member States consider investing at least 2% of national health expenditures and that at least 5% of health sector project and programme aid from development aid agencies in research and research capacity strengthening. I believe that these are challenging but realistic targets, if we include also resources needed for programme monitoring and evaluation which are often weak or neglected.

Strengthening of research capacity must take place at individual, institutional and system levels, and it needs long-term investment. Capacity strengthening is needed for both researchers to generate better evidence, and for policy-makers and health care professionals to use available evidence better.

The current capacity for health research is weak in most Pacific island countries. The reasons include poorly developed national health research systems, limited human and financial resources, lack of a critical mass of health researchers, and limited access to information resources. Health research capacity is clearly insufficient to provide necessary evidence to support decision-making.

It is good to discuss the term "research" in the Pacific context. Most of health research in Pacific island countries is focused on epidemiological studies, disease surveillance and
Although WHO have limited resources, we have been able to support the Pacific island countries to conduct several studies in these areas. We prefer to support studies which are closely linked to programme planning, monitoring and evaluation.

WHO is not a major funding agency for research. Our role is to advocate for countries to build stronger health research systems. In addition, we promote the better use of evidence and provide technical advice in a wide range of issues, such as selecting relevant research topics, study design, analysis, dissemination of results and in policy-making.

Following WHO's clear commitment for research, we have, in collaboration with other partners, organized this meeting to discuss how to strengthen research capacity and support development of effective national health research systems in the Pacific. The objectives of this consultation are to review the development of national health research systems and current capacity in health research in the Pacific island countries. We will also discuss methods for setting research priorities, ways to improve research capacity and health research systems, options for better and sustainable funding for health research, and ways to improve access to and utilization of Pacific health research reports. In addition, we will begin to develop mechanisms for better health research networking between Pacific institutions and countries.

While it is a challenge to build sufficient health research capacity in Pacific island countries, I believe that using your local knowledge, combined with international best practices, you will find solutions and make practical recommendations for action. I also believe that networking and collaboration between the Pacific countries and research institutes, with support from international partners, will be of crucial importance.

I look forward to hearing your suggestions regarding the best ways for strengthening health research capacity and use of evidence in Pacific countries, and how WHO could best support these efforts. I wish you successful meeting and hope you have an enjoyable stay in Fiji.

Thank you.